

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 319649	RECEIPT DATE:	06 / 10 / 99
IA NUMBER:	PCT/ JP97 / 04576	IA FILING DATE:	12 / 12 / 97
FAMILY NAME:	KAMADA	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	TOMIHISA	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	12 / 13 / 96
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	Y-163	COUNTRY:	JPX
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	TELEPHONE	5032240115
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APPLICATION TITLES:

METHOD AND DEVICE FOR OBTAINING AUDIENCE DATA ON TV PROGRAMS

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Bib Data Sheet

CONFIRMATION NO. 3408

<b>SERIAL NUMBER</b> 09/319,649	<b>FILING OR 371(c) DATE</b> 06/10/1999 <b>RULE</b>	<b>CLASS</b> 725	<b>GROUP ART UNIT</b> 2611	<b>ATTORNEY DOCKET NO.</b> Y-163
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/JP97/04576 12/12/1997

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

JAPAN 8-352905 12/13/1996

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

12/10/2002

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 11	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>				

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**TITLE**

METHOD AND DEVICE FOR OBTAINING AUDIENCE DATA ON TV PROGRAM

<b>FILING FEE RECEIVED</b> 1182	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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